

**Work Order ID 104895****\*104895\***

Page 1

Tuesday, July 23, 2013 9:16:22 AM

**Item ID:** D2370-1**Accept****\*N900040100\*****Setup****Start****\*NS1\*****Revision ID:****Item Name:** Litter Frame Assembly**Stop****\*NS2\*****Start Date:** 7/23/2013 **Start Qty:** 4.00**\*4\*****Cust Item ID:****Required Date:** 7/26/2013 **Req'd Qty:** 4.00**\*4\*****Customer:****Reference:**

<b>Approvals:</b>	<b>Process Plan:</b> <i>MF</i>	<b>Date:</b> <i>13-7-23</i>	<b>Tooling:</b>	<b>Date:</b>	<b>Run</b>	<b>Start</b>	<b>*NR1*</b>
	<b>QC:</b>	<b>Date:</b>	<b>SPC (Y/N):</b>	<b>Date:</b>		<b>Stop</b>	<b>*NR2*</b>

<b>Sequence ID/ Work Center ID</b>	<b>Operation Description</b>	<b>Set Up/ Run Hours</b>	<b>Tool ID</b>	<b>Tool #</b>	<b>Plan Code</b>	<b>Accept Qty</b>	<b>Reject Qty</b>	<b>Reject Number</b>	<b>Insp. Stamp</b>
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<b>Draw Nbr</b>	<b>Revision Nbr</b>								
D2370									
100		0.00							
<b>*100*</b>	PURCHASING								
Purchasing									
Purchasing									
	<b>Memo</b>	0.00							
	Issue p/o:								
	Order: Model 12-2A undrilled with grey pad & black belts								
	Supplier: Ferno Aviation								
	Letter of compliance required								
110	Receive & Inspect for Damage & Mat'l Certs	0.00							
<b>*110*</b>									
Packaging									
Packaging									
	<b>Memo</b>	0.00							
	Insure that letter of compliance is attached to w/o								
120	QC6- Inspect dimensions to drawing	0.00							
<b>*120*</b>									
QC									
Quality Control									
	<b>Memo</b>	0.00							

*A* *MF*  
*13-7-23*  
*already  
purchased  
on  
7/10/2011*

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS															
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/>	Quality <input type="checkbox"/>	Other <input type="checkbox"/>
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance			Initial Chief Eng	Action Description			Sign & Date	Verification	QC Inspector								
Doc/Data <input type="checkbox"/>																					
Equip/Tooling <input type="checkbox"/>																					
Operator <input type="checkbox"/>																					
Material <input type="checkbox"/>																					
Setup <input type="checkbox"/>																					
Other <input type="checkbox"/>																					
Process <input type="checkbox"/>																					
Supplier <input type="checkbox"/>																					
Training <input type="checkbox"/>																					
Unapproved <input type="checkbox"/>																					
FAULT CATEGORY																					
Landing Gear				General																	
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio				<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions													
								<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge													
								<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled													
								<input type="checkbox"/> Other													

**Work Order ID 104895**

Tuesday, July 23, 2013 9:16:22 AM

**\*104895\***

Page 2

Item ID: D2370-1

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Item Name: Litter Frame Assembly

Stop

**\*NS2\***

Start Date: 7/23/2013 Start Qty: 4.00

**\*4\***

Cust Item ID:

Required Date: 7/26/2013 Req'd Qty: 4.00

**\*4\***

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

130

**\*130\***

Small Fab

Small Fab

Small Fab

0.00

4 9

FF  
13-07-24

Memo

0.00

1- Assemble D2374 STUDS WITH HARDWARE as per Dwg D2370

S 1/24 2- Assemble Bolts &gt; 2374

140

**\*140\***

QC

Quality Control

QC5- Inspect part completeness to step on W/O

0.00

DAS  
27  
06

4

13.7.24

150

**\*150\***

Packaging

Packaging

Identify as per dwg & Stock Location: 200A 0.00

Memo

0.00

4X

80  
13-7-24

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS														
Part No. _____	Work Order Update	Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/>	Quality <input type="checkbox"/>	Other <input type="checkbox"/>
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification		QC Inspector							
Doc/Data																			
Equip/Tooling																			
Operator																			
Material																			
Setup																			
Other																			
Process																			
Supplier																			
Training																			
Unapproved																			
FAULT CATEGORY																			
Landing Gear	General				Grain				Ovalized				Pressure/Forced						
	Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Pressure/Forced	<input type="checkbox"/>	Temperature/Cure	<input type="checkbox"/>	Weld	<input type="checkbox"/>	Wrong Stock Pulled				
	Centre Not Concentric to O/S	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Other	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>	Power Loss/Surge				
	Cracks	<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>	Other	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>	Power Loss/Surge				
	Crushed/Crimped	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>	Other	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>	Power Loss/Surge				
	Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Other	<input type="checkbox"/>	Other	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Other	<input type="checkbox"/>	Other				
	Heat Treat	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Other	<input type="checkbox"/>	Other	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Other	<input type="checkbox"/>	Other				
	Inspection Strip in Tube	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Offset	<input type="checkbox"/>	Other	<input type="checkbox"/>	Other	<input type="checkbox"/>	Folio	<input type="checkbox"/>	Other	<input type="checkbox"/>	Other				
	Ripples in Bend	<input type="checkbox"/>			Out of Calibration	<input type="checkbox"/>	Other	<input type="checkbox"/>	Other										
	Torque Waves in Extrusion	<input type="checkbox"/>			Out of Sequence	<input type="checkbox"/>	Other	<input type="checkbox"/>	Other										
	Turning Sequence	<input type="checkbox"/>			Outside Dimensions	<input type="checkbox"/>	Other	<input type="checkbox"/>	Other										
	Wave/Twist in Tube	<input type="checkbox"/>																	

**Work Order ID 104895****\*104895\***

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Tuesday, July 23, 2013 9:16:22 AM

Item ID: D2370-1

Accept

**\*N900040100\***

Setup

Start

**\*NS1\***

Revision ID:

Item Name: Litter Frame Assembly

Stop

**\*NS2\***

Start Date: 7/23/2013 Start Qty: 4.00

**\*4\***

Cust Item ID:

Required Date: 7/26/2013 Req'd Qty: 4.00

**\*4\***

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***Sequence ID/  
Work Center IDOperation  
Description

160

QC21- Final Inspection - Work Order Release

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp**\*160\***

QC

Quality Control

Memo

0.00

0.00

MLJ 13-07-26

MF

B-7-24

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS								
				Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>						
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector				
Doc/Data	<input type="checkbox"/>													
Equip/Tooling	<input type="checkbox"/>													
Operator	<input type="checkbox"/>													
Material	<input type="checkbox"/>													
Setup	<input type="checkbox"/>													
Other	<input type="checkbox"/>													
Process	<input type="checkbox"/>													
Supplier	<input type="checkbox"/>													
Training	<input type="checkbox"/>													
Unapproved	<input type="checkbox"/>													
FAULT CATEGORY														
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	
											<input type="checkbox"/> Other			

# Picklist Print

Tuesday, July 23, 2013 9:16:22 AM

Page 1

Work Order ID: 104895

Parent Item: D2370-1

Start Date: 7/23/2013

Required Date: 7/26/2013

Parent Item Name: Litter Frame Assembly

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP REV:A NEW ISSUE 13-07-22 JLM VERIFIED BY:JFS

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

D2370-1P N MF 13-07-23 Purchased

Litter Frame Assembly A

D2374 Manufactured

Stud

D2378 Manufactured

Bolt

D2484 Manufactured

Locknut

X AN960JD416L NAS1149D0416J Purchased

Washer

Location Loc Qty Loc Code

ST009 93

102431 24

103860 24

95796 11

98114 34

Each 64.0000

Location Loc Qty Loc Code

ST009 64

102198 25

79476 4

89339 10

97240 25

Each 80.0000

Location Loc Qty Loc Code

Mezz 80

22016 80

Each 4.0000

Location Loc Qty Loc Code

FP001 4

110153 4

D2370-041 x 4 102081

FF 13-07-24

FF 13-07-24

FF 13-07-24

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## WORK ORDER NON-CONFORMANCE / UPDATE

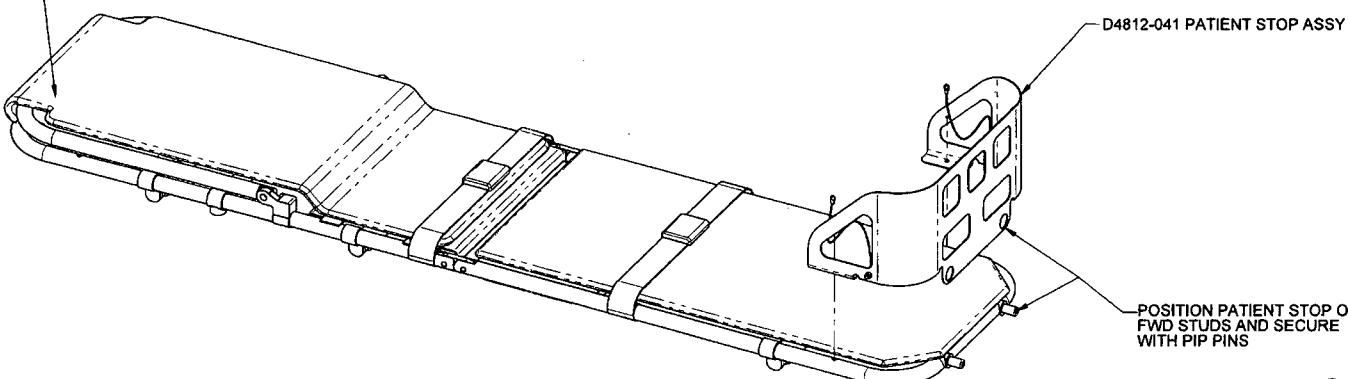
QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear	General									
	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced		
	<input type="checkbox"/>	Centre Not Concentric to O/S	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure		
	<input type="checkbox"/>	Cracks	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld		
	<input type="checkbox"/>	Crushed/Crimped	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled		
	<input type="checkbox"/>	Cuffs	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>			
	<input type="checkbox"/>	Heat Treat	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>			
	<input type="checkbox"/>	Inspection Strip in Tube	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>	Other		
	<input type="checkbox"/>	Ripples in Bend	<input type="checkbox"/>	Offset	<input type="checkbox"/>		<input type="checkbox"/>			
	<input type="checkbox"/>	Torque Waves in Extrusion	<input type="checkbox"/>	Out of Calibration	<input type="checkbox"/>		<input type="checkbox"/>			
	<input type="checkbox"/>	Turning Sequence	<input type="checkbox"/>	Out of Sequence	<input type="checkbox"/>		<input type="checkbox"/>			
	<input type="checkbox"/>	Wave/Twist in Tube	<input type="checkbox"/>	Outside Dimensions	<input type="checkbox"/>		<input type="checkbox"/>			

8 7 6 5 4 3 2 1

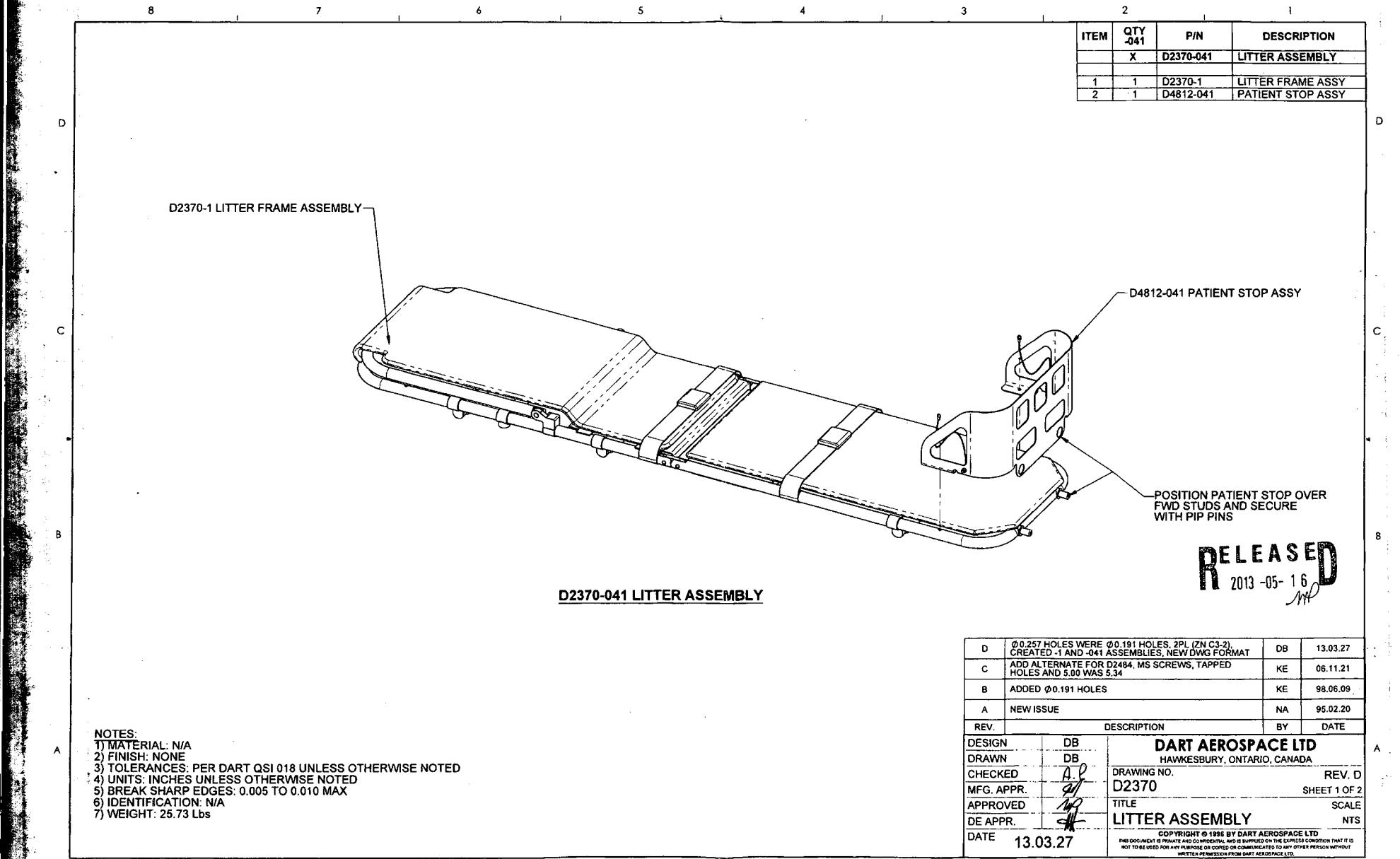
ITEM	QTY -041	P/N	DESCRIPTION
	X	D2370-041	LITTER ASSEMBLY
1	1	D2370-1	LITTER FRAME ASSY
2	1	D4812-041	PATIENT STOP ASSY

D2370-1 LITTER FRAME ASSEMBLY



D2370-041 LITTER ASSEMBLY

RELEASED  
R 2013-05-16  
M



NOTES:  
 1) MATERIAL: N/A  
 2) FINISH: NONE  
 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED  
 4) UNITS: INCHES UNLESS OTHERWISE NOTED  
 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX  
 6) IDENTIFICATION: N/A  
 7) WEIGHT: 25.73 Lbs

8 7 6 5 4 3 2 1

D	Ø 0.257 HOLES WERE Ø 0.191 HOLES, 2PL (ZN C3-2), CREATED -1 AND -041 ASSEMBLIES, NEW DWG FORMAT	DB	13.03.27
C	ADD ALTERNATE FOR D2484, MS SCREWS, TAPPED HOLES AND 5.00 WAS 5.34	KE	06.11.21
B	ADDED Ø 0.191 HOLES	KE	98.06.09
A	NEW ISSUE	NA	95.02.20
REV.	DESCRIPTION		
DESIGN	DB	DART AEROSPACE LTD	
DRAWN	DB	HAWKESBURY, ONTARIO, CANADA	
CHECKED	A.0	DRAWING NO. D2370	
MFG. APPR.	SP	REV. D SHEET 1 OF 2	
APPROVED	SP	TITLE LITTER ASSEMBLY	
DE APPR.	SP	SCALE NTS	
DATE	13.03.27	COPYRIGHT © 1996 BY DART AEROSPACE LTD. THIS DOCUMENT IS THE PROPERTY OF DART AEROSPACE LTD. IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

NCR: Yes / No

DQA: Date:

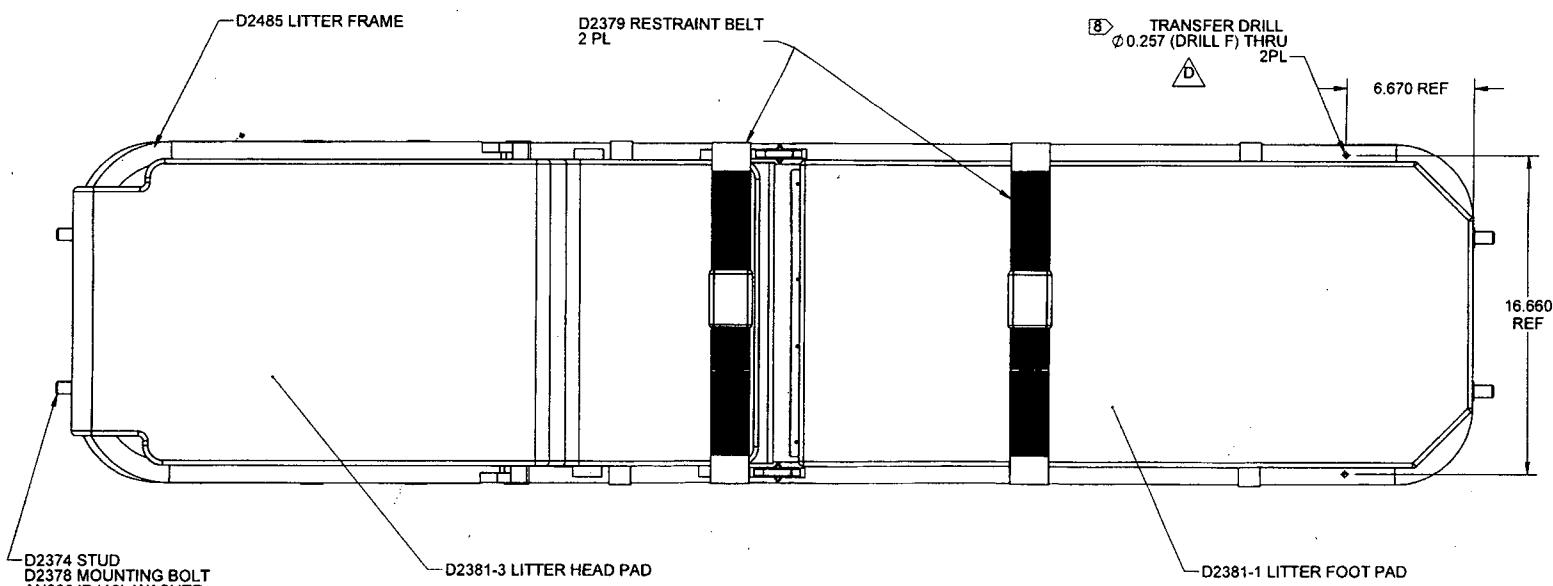
## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS								
				Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector				
Doc/Data														
Equip/Tooling														
Operator														
Material														
Setup														
Other														
Process														
Supplier														
Training														
Unapproved														
FAULT CATEGORY														
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	
													<input type="checkbox"/> Other	

8 7 6 5 4 3 2 1

ITEM	QTY	P/N	DESCRIPTION
	X	D2370-1	LITTER ASSEMBLY
1	4	D2374	STUD
2	4	D2378	MOUNTING BOLT
3	2	D2379	RESTRAINT BELT
4	1	D2381-1	LITTER FOOT PAD
5	1	D2381-3	LITTER HEAD PAD
6	4	D2484	LOCK NUT
7	1	D2485	LITTER FRAME
8	4	AN960JD416L	WASHER



RELEASED  
2013-05-16

## NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D2370-1" USING A REMOVABLE TAG AS PER QS1 044 METHOD 6.6
- 7) WEIGHT: 24.69 Lbs
- 8) TRANSFER DRILL USING D4812-041 AS TEMPLATE. ENSURE FIT AND REMOVE FOR SHIPPING

DESIGN	DB	DART AEROSPACE LTD
DRAWN	DB	HAWKESBURY, ONTARIO, CANADA
CHECKED	A.P.	
MFG. APPR.	2/1	REV. D
APPROVED	1/1	SHEET 2 OF 2
DE APPR.	1/1	TITLE
DATE	13.03.27	SCALE
		NTS
		LITTER ASSEMBLY
		COPYRIGHT © 1986 BY DART AEROSPACE LTD THIS DOCUMENT IS PROPERTY OF DART AEROSPACE LTD. IT IS THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____ Part No. _____ NCR No. _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS						
			Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear	Bending Centre Not Concentric to O/S Cracks Crushed/Crimped Cuffs Heat Treat Inspection Strip in Tube Ripples in Bend Torque Waves in Extrusion Turning Sequence Wave/Twist in Tube			General Bend BOM/Route Broken/Damaged Burrs Contamination Countersink Cut Too Short Drill Holes Drawing Finish Folio		Grain Hardware Inspection Incomplete Instructions Incomplete/Unclear Maintenance Mislabeled Misread Offset Out of Calibration Out of Sequence Outside Dimensions		Ovalized Over/Under tolerance Part Incorrect Part Lost/Missing Part Moved Positioned Wrong Power Loss/Surge		Pressure/Forced Temperature/Cure Weld Wrong Stock Pulled Other	